

## **Senate Concurrent Resolution No. 49**

### **RESOLUTION CHAPTER 123**

Senate Concurrent Resolution No. 49—Relative to medication errors.

[Filed with Secretary of State September 14, 2005.]

#### **LEGISLATIVE COUNSEL'S DIGEST**

SCR 49, Speier. Medication errors panel.

This measure would create a panel to study the causes of medication errors and recommend changes in the health care system that would reduce errors associated with the delivery of prescription and over-the-counter medication to consumers. The measure would require the panel to convene by October 1, 2005, and to submit to the Assembly Committee on Health and the Senate Committee on Health a preliminary report by March 1, 2006, and a final report by June 1, 2006.

WHEREAS, Numerous studies establish that medication errors cause injury and death to patients and consumers; and

WHEREAS, The Institute of Medicine estimates the cost for treatment of drug-related morbidity and mortality may run nearly \$77 billion a year nationally; and

WHEREAS, Research demonstrates that most injuries resulting from medication errors are not the fault of any individual health care professional, but rather represent the failure of a complex health care system; and

WHEREAS, The Federal Food and Drug Administration has approved 122 chemical compounds since 2002, and over 17,000 existing trade and generic names of products exist, many of which sound alike or are spelled alike; and

WHEREAS, These products are also packaged and distributed in similar shapes and forms; and

WHEREAS, The demand for prescription drugs is expected to substantially increase; and

WHEREAS, Medication errors occur in all settings in which prescription drug products are prescribed, dispensed, furnished, ordered, or otherwise provided; and

WHEREAS, Many factors contribute to a poor understanding by many consumers and patients about their prescriptions, including frequent switching of generic brands that are each different colors and shapes so that the same drug looks different and confuses the patient making it hard to easily spot mistakes; overworked pharmacists; reduced time with physicians for patients to be given important drug information; patients seeing multiple physicians that may be unaware of each other's care plans;

patients often using vitamins, herbs, and over-the-counter drugs that can react with the medications they take and that both the physician and pharmacist do not know about; and

WHEREAS, Research has demonstrated that improved communication between patients and their health professionals is the most effective means of reducing errors and drug misadventures and improving health care outcomes; now, therefore, be it

*Resolved by the Senate of the State of California, the Assembly thereof concurring,* That a special panel be formed to study causes of medication errors; and be it further

*Resolved,* That the Legislature shall convene the panel no later than October 1, 2005; and be it further

*Resolved,* That the panel shall recommend improvements, additions, or changes to be constructed and implemented for the significant improvement of the health care system by reducing errors associated with the delivery of prescription and over-the-counter medications to consumers; and be it further

*Resolved,* That the Speaker of the Assembly shall appoint to the panel a member of the faculty of a school of pharmacy, a representative of the California Pharmacists Association, a representative of the California Association of Health Plans, a representative of the Pharmaceutical Research and Manufacturers of America, a member of the California Medical Association, a member or representative of the Assembly Democratic Caucus, a member or representative of the Assembly Republican Caucus, and a consumer representative; and be it further

*Resolved,* That the Senate Committee on Rules shall designate the chair and appoint to the panel a representative of the California Retailers Association Chain Drug Committee, a member of the California Society of Hospital Pharmacists, a representative of the Generic Pharmaceutical Association, a representative of a public health organization, a member of the California Nurses Association, a representative of AARP, a representative of the Consumer Health Care Products Association, a member or representative of the Senate Democratic Caucus, and a member or representative of the Senate Republican Caucus; and be it further

*Resolved,* That the members of the panel shall not receive compensation, but shall be reimbursed from private sources for necessary travel expenses for the purpose of attending meetings of the panel, including any public meetings that the panel schedules, and the panel shall be funded by private sources; and be it further

*Resolved,* That the panel shall submit to the Senate Committee on Health and the Assembly Committee on Health a preliminary report of its conclusions and recommendations by March 1, 2006, and a final report of its conclusions and recommendations no later than June 1, 2006; and be it further

*Resolved,* That the Secretary of the Senate transmit copies of this resolution to the author for appropriate distribution.

O